



**NON-PROFIT LODGING TAX EXEMPTION CERTIFICATE
FOR CITY OF CORVALLIS & BENTON COUNTY**
(A completed certificate is required for a tax exemption.)



Non-Profit

Non-Profit Organization (*please print*): _____

Authorized Representative: _____

Non-Profit Contact Information (*email address or phone number*): _____

Certificate Issued to:

Lodging Entity: _____

Lodging Address: _____

Occupant: _____

Occupancy from (*check-in date*): _____ Occupancy to (*check-out date*): _____

This is to certify that I, the undersigned, am an authorized representative of the non-profit organization indicated above; that the charges for the occupancy dates and lodging establishment indicated above are paid for by the above indicated non-profit and that charges incurred are for the purpose of emergency or temporary shelter.

Signature of authorized representative

Date

Lodging Entity

A completed certificate is required for a tax exemption. For privacy reasons the Occupant field may be blank or entered as 'John Doe' or 'Jane Doe'.

Gross rent paid (exemption amount): _____

Signature of staff member

Date

City of Corvallis Code of Ordinances Section 8.04.050 states no tax shall be imposed on any occupant whose rent is paid for the purpose of emergency or temporary shelter, with a voucher bearing the seal of the City of Corvallis, issued by a tax-exempt, non-profit charitable organization, as defined by the Oregon Department of Revenue. **RETAIN THIS RECORD FOR A PERIOD OF NOT LESS THAN 3 YEARS AND 6 MONTHS.**